Redacted

EXHIBIT 4
DATE 2-16-09
HB 394

Amendments to House Bill No. 394
1st Reading Copy

Requested by Representative Dave McAlpin

For the House Human Services Committee

Prepared by Sue O'Connell
February 9, 2009 (11:27am)

1. Page 1.
Following: line 23
Insert: "(1) "Device" means any instrument, apparatus, or contrivance intended:
(a) for use in the diagnosis, cure, mitigation, treatment, or prevention of disease in humans; or
(b) to affect the structure or any function of the human body."
Renumber: subsequent subsections

2. Page 2.
Following: line 8
Insert: "(4) "Patient" means an individual who receives or has received health care.
(5) "Prescriber" means a medical practitioner, as defined in 37-2-101, licensed under the professional laws of this state to administer and prescribe medicine and drugs.
(6) "Prescription drug" means any drug that is required by federal law or regulation to be dispensed only by a prescription subject to section 503(b) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 353).
(7) "Prescription drug order" has the meaning provided in 37-7-101."
Renumber: subsequent subsections

3. Page 3, line 11.
Strike: "an administrative"
Insert: "a civil"

4. Page 3, line 12.
Strike: ", as assessed by the department"

5. Page 3.
Following: line 13
Insert: "(3) An agency that regulates, licenses, certifies, or registers a person who knowingly fails to comply with the

requirements of [sections 1 through 7] may seek administrative relief as provided by law."

Renumber: subsequent subsection

6. Page 8, line 9.
Strike: "Title 37, chapter 7, part 4," and "Title 37, chapter 7,"
Insert: "Title 50, chapter 4," in two places

- END -

Adopted

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Prepared by Sue O'Connell
February 9, 2009 (11:27am)

1. Page 3, line 18 through line 19.
Strike: section 5 in its entirety
Renumber: subsequent sections

- END -

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For the House Human Services Committee

Prepared by Sue O'Connell
February 16, 2009 (11:52am)

1. Page 2, line 19.
Following: "(3)"
Insert: "(a)"

2. Page 2.
Following: line 20
Insert: "(b) Nonmarketing purposes include but are not limited to:

(i) efforts by a health plan or benefits management program to ensure compliance with an independently established formulary based on evidence-based prescribing guidelines and cost containment goals;

(ii) educational or quality assurance programs designed for individuals covered by a health plan or benefits management program;

(iii) communication by a pharmacist about issues related to patient safety, generic substitution, or questions from a patient about a prescription drug; or

(iv) any communication about safety warnings, adverse event reporting, labeling changes, or compliance with federal risk evaluation and mitigation strategies."

- END -